

FERENCE & ASSOCIATES LLC  
*Amendment Transmittal*

Atty. Docket No. YOR920030043US1  
(590.105)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of : Chaudhari et al.  
Serial No. : 10/611,336 Examiner : James S. Wozniak  
Filed : June 30, 2003 Group Art Unit : 2626  
For : METHOD OF MODELING SINGLE-ENROLLMENT CLASSES IN  
VERIFICATION AND IDENTIFICATION TASKS

COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria Virginia 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

1.  Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.

OR

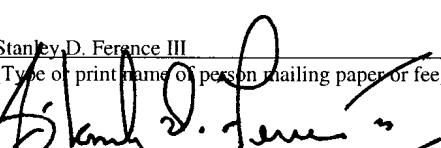
2.  In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

3.  Small Entity status of this application has been established by a verified statement previously submitted.

4.  A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF TRANSMISSION

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being transmitted by EFS-WEB on June 20, 2008 to the Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Stanley D. Ference III  
(Type or print name of person mailing paper or fee)  
  
(Signature of person mailing paper or fee)

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5.  Also enclosed: \_\_\_\_\_

6.  No additional filing fee is required.

7.  The filing fee has been calculated as shown below:

Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)	<u>SMALL ENTITY</u>			<u>OTHER THAN A SMALL ENTITY</u>		
			<u>RATE</u>	<u>Fee</u>	<u>RATE</u>	<u>Fee</u>		
Total Claims	17	- ** 20	= * 0	x \$25 =	O x \$50 =	O R		
Ind. Claims	3	- *** 3	= * 0	x \$105 =	O x \$210 =	O R		
<input checked="" type="checkbox"/> Multiple Dependent Claim Presented				+ \$185 =	O + \$370 =	O R		
				<u>TOTAL</u> = \$ _____	O R	<u>TOTAL</u> = \$0.00		

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space.

\*\*\* If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space.

8.  Applicant encloses herewith a check for \$0.00 to cover the filing fee.

9.  The Commissioner is hereby authorized to charge the \$0.00 filing fee to Deposit Account No. 50-0510.

10.  Applicant is concurrently paying the required fees via credit card through EFS-Web.

11.  The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

Respectfully submitted,

REFERENCE & ASSOCIATES LLC

By Stanley D. Ference III  
Stanley D. Ference III  
Reg. No. 33879

Dated: June 20, 2008

**Mailing Address:**

**Customer No. 35195**  
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